

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	292	32	3/29
FORMALITY REVIEW	23	503-843	2-1-12-51
RESPONSE FORMALITY REVIEW	H2	412	07-20-01

09/801930

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
" ..... Allowed      I ..... Interference  
- (Through numeral)... Canceled      A ..... Appeal  
+ ..... Restricted      O ..... Objected

BEST AVAILABLE CO

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If more than 150 claims or 10 actions  
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